

CEU/Non-Credit Registration Form



SACRAMENTO STATE
COLLEGE OF CONTINUING EDUCATION

Use this form to pay your own enrollment fees. If your company/agency agrees to be billed directly for your enrollment fees, **do not** use this form. Use the **Registration Agreement** form.

How To Register:

By Phone (Staff Assisted)

(916) 278-4433

(Visa, MasterCard, and Discover only)

By Mail

Mail your completed registration form with payment (no cash) to:
Sacramento State
College of Continuing Education
3000 State University Drive East
Sacramento, CA 95819-6103

In Person

(no cash)

Sacramento State
College of Continuing Education
Napa Hall
3000 State University Drive East
Sacramento, CA 95819-6103

Online

(Visa, MasterCard, and Discover only)

www.cce.csus.edu

For disability accommodations call
(916) 278-4433 – three-week advanced
notice requested.

PARTICIPANT INFORMATION

(Please print clearly in black or blue ink)

Birthdate: _____ / ____ / ____

Mr.
 Ms.

Name - First: _____ Middle Initial: _____ Last: _____

Home Address (Number, Street, Apt.): _____

City: _____ State: _____ Zip: _____

Company Name: _____

Job Title: _____

Company Address (Number, Street, Suite): _____

City: _____ State: _____ Zip: _____

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Work Phone: _____ Home Phone: _____

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Fax: _____ Email: _____

Are you a CSUS Alumni Association member? Yes No

Member #: _____

Highest level of education completed:

B.A./B.S. Trade School/Other
 High School M.A./M.S. Some College
 A.A. Ph.D.

COURSE INFORMATION

COURSE CODE	COURSE TITLE	START DATE
_____	_____	_____
_____	_____	_____
_____	_____	_____

Course information from? Brochure Web site Other

PAYMENT INFORMATION

Visa
 MasterCard
 DISCOVER
 Check/Money Order (payable to CSUS)

Name of cardholder: _____

Card # (Visa 13-16 digits; MasterCard 16 digits): _____

Cardholder's Signature: _____ Exp. Date: _____

Will your company reimburse you for your registration fees? Yes No